



FH  
[REDACTED]

**STATE OF WISCONSIN  
Division of Hearings and Appeals**

---

In the Matter of

[REDACTED]  
[REDACTED]  
[REDACTED]

DECISION

MGE/168134

---

**PRELIMINARY RECITALS**

Pursuant to a petition filed August 21, 2015, under Wis. Stat. § 49.45(5), and Wis. Admin. Code § HA 3.03(1), to review a decision by the Milwaukee Enrollment Services in regard to Medical Assistance, a hearing was held on November 03, 2015, at Milwaukee, Wisconsin.

The issue for determination is whether the agency properly determined the Petitioner's deductible for MA eligibility.

There appeared at that time and place the following persons:

**PARTIES IN INTEREST:**

Petitioner:

[REDACTED]  
[REDACTED]  
[REDACTED]

Respondent:

Department of Health Services  
1 West Wilson Street, Room 651  
Madison, Wisconsin 53703  
By: Belinda Brown  
Milwaukee Enrollment Services  
1220 W Vliet St, Room 106  
Milwaukee, WI 53205

**ADMINISTRATIVE LAW JUDGE:**

Debra Bursinger  
Division of Hearings and Appeals

**FINDINGS OF FACT**

1. Petitioner (CARES # [REDACTED]) is a resident of Milwaukee County.
2. For the period of December 1, 2014 – May 31, 2015, the Petitioner met her MA deductible and was enrolled in the MA program.

3. On July 22, 2015, the Petitioner reapplied for MA. She reported a household size of one for purposes of the MA assistance group. Her only income is SSDI of \$1,845/month. A recoupment of \$50 is subtracted from the Petitioner's SSDI check. Her rent is \$400/month. She pays a monthly phone bill of \$40.
4. On July 23, 2015, the agency issued a Notice of Proof Needed to the Petitioner requesting bank account verification. The due date for the verifications was August 21, 2015.
5. On August 19, 2015, the agency issued a Notice of Decision to the Petitioner informing her that she will be eligible for MA only if she meets a deductible.
6. On August 24, 2015, the agency issued a Notice of Decision to the Petitioner informing her that she will be eligible for MA if she meets a deductible of \$7,399.98 during the deductible period of July 1, 2015 – December 31, 2015.
7. On October 9, 2015, the Petitioner filed an appeal with the Division of Hearings and Appeals.

### **DISCUSSION**

When a person's income is over the MA limit, an MA deductible must be met before eligibility begins. Wis. Stat., §49.47(4)(c)2; Wis. Admin. Code, §DHS 103.08(2)(a); MA Handbook, App. 24.2. The current income limit for a one-person household is \$591.67. MA Handbook, App. 39.4.1. The deductible is determined by subtracting the MA limit from the person's net income, and then multiplying the result by six.

An MA deductible is calculated for a six-month period. When that period ends, a new deductible is then established for the next six months. Wis. Admin. Code, §DHS 103.08(2)(c); MA Handbook, App. 24.3. To obtain MA during the deductible period, the client must submit to the economic support worker copies of medical bills incurred. MA eligibility begins as of the date that the incurred bills meet the deductible amount.

In this case, the Petitioner submitted medical bills to the agency in August, 2015. The agency verified that effective September 1, 2015, the Petitioner has met the deductible and is enrolled in the MA program.

I reviewed the agency's determination regarding the deductible and find that the agency properly determined that the Petitioner's income exceeds the income limit for the program and that she is eligible only with a deductible. I also reviewed the agency's calculations for the deductible and find that it was properly calculated.

Based on the evidence, I conclude the agency properly determined that the Petitioner was eligible for MA with a deductible of \$7,399.98.

### **CONCLUSIONS OF LAW**

The agency properly determined that the Petitioner was eligible for MA with a deductible of \$7,399.98.

**THEREFORE, it is**

**ORDERED**

That the Petitioner's appeal is dismissed.

## REQUEST FOR A REHEARING

You may request a rehearing if you think this decision is based on a serious mistake in the facts or the law or if you have found new evidence that would change the decision. Your request must be **received within 20 days after the date of this decision**. Late requests cannot be granted.

Send your request for rehearing in writing to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400 **and** to those identified in this decision as "PARTIES IN INTEREST." Your rehearing request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and explain why you did not have it at your first hearing. If your request does not explain these things, it will be denied.

The process for requesting a rehearing may be found at Wis. Stat. § 227.49. A copy of the statutes may be found online or at your local library or courthouse.

## APPEAL TO COURT

You may also appeal this decision to Circuit Court in the county where you live. Appeals must be filed with the Court **and** served either personally or by certified mail on the Secretary of the Department of Health Services, 1 West Wilson Street, Room 651, Madison, Wisconsin 53703, **and** on those identified in this decision as "PARTIES IN INTEREST" **no more than 30 days after the date of this decision** or 30 days after a denial of a timely rehearing (if you request one).

The process for Circuit Court Appeals may be found at Wis. Stat. §§ 227.52 and 227.53. A copy of the statutes may be found online or at your local library or courthouse.

Given under my hand at the City of Milwaukee,  
Wisconsin, this 16th day of November, 2015

---

\sDebra Bursinger  
Administrative Law Judge  
Division of Hearings and Appeals



**State of Wisconsin\DIVISION OF HEARINGS AND APPEALS**

Brian Hayes, Administrator  
Suite 201  
5005 University Avenue  
Madison, WI 53705-5400

Telephone: (608) 266-3096  
FAX: (608) 264-9885  
email: [DHAmail@wisconsin.gov](mailto:DHAmail@wisconsin.gov)  
Internet: <http://dha.state.wi.us>

The preceding decision was sent to the following parties on November 16, 2015.

Milwaukee Enrollment Services  
Division of Health Care Access and Accountability